House Committee on Regulatory Reform
October 8, 2013
HB 4405

Written testimony provided by:
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The American Cancer Society Cancer Action Network (ACS CAN), the advocacy affiliate of The American Cancer Society (ACS) advocates for public policies that will help reduce the risk of skin cancer including those which prohibit the use of indoor tanning devices among minors. ACS CAN supports HB 4405, prohibiting minors from using indoor tanning devices.

Skin cancer is the number one diagnosed cancer in the United States, with over two million men and women diagnosed each year.[1] **Melanoma, the most deadly form of skin cancer**, is expected to be diagnosed in 76,000 people, with almost 10,000 dying from the disease this year alone.[2] According to the National Cancer Institute**, the cost of melanoma was $2.36 billion in 2010 with expected increases in the coming years.**[3] Even more worrisome is that **melanoma is the second most common cancer among young adults aged 15-29 years.**[4] These rates have been rising for the past 30 years.[5] In fact, between 2005-2009, melanoma rates increased among whites at a rate of 3 percent per year.[6]

The most avoidable risk factor for skin cancer is exposure to ultraviolet (UV) radiation through outdoor exposure to the sunlight and use of indoor tanning devices.[7] The appearance of a tan is the body's way of trying to protect itself from UV radiation and signifies DNA damage to skin.[8] Therefore no tan is considered "safe". In fact, UV exposure during childhood and teenage year's results in an even higher risk of developing skin cancer as an adult[9] with **melanoma risk being increased by 59 percent if a tanning device is used before the age of 35.**[10]

Despite the risks and documented link, use of indoor tanning devices is on the rise among high school aged girls. In 2011, 21 percent of high school girls reported using an indoor tanning device in the past 12 months with rates increasing up to 32 percent for girls who were in the senior class.[11] .) This is why one of the Healthy People 2020 objectives is to "reduce the proportion of adolescents in grades 9 through 12 who report using artificial sources of ultraviolet light for tanning". Misinformation and deceptive practices from the indoor tanning industry and salons are partly to blame for such high tanning rates as evidenced by a 2012 congressional committee report and a 2010 Federal Trade Commission settlement with the Indoor Tanning

Association. [12] [13] Please see the attached text for additional information addressing these claims and facts.

This sentiment is shared by organizations within the United States and in some other parts of the world. Many US organizations support laws that would prohibit the use of tanning devices by minors including ACS CAN, the American Academy of Pediatrics, the American Academy of Dermatology, and the American Medical Association. There is also international movement to ban tanning beds. **The World Health Organization now categorizes tanning devices as a class 1 carcinogen, the same category as asbestos and tobacco, and recommends that minors not be allowed to use them.** Brazil has completely banned indoor tanning and Victoria, British Columbia has banned tanning for minors.

Because the science demonstrates that tanning devices cause cancer, ACS CAN supports HB 4405 to prohibit minors under the age of 18 from using indoor tanning devices, without any exceptions. To date, 5 states have passed similar comprehensive legislation prohibiting the use of tanning devices by minors, without exception, in order to protect their state's youth. Similar age restrictions on harmful substances and services have been placed on tobacco products and alcohol. Restricting access to indoor tanning bed use based on age is no different. **Given what is known about the harmful effects of UV radiation from indoor tanning devices, especially among youth, Michigan should pass HB 4405 prohibiting minors from using indoor tanning devices.** Please feel free to contact me directly if I can provide any additional information or if you have any questions.

THE FACTS

Despite reputable scientific studies showing that tanning devices can cause skin cancer, representatives from the indoor tanning industry continue to make exaggerated claims about the health benefits of indoor tanning. This fact sheet debunks many of the most egregious claims made by the industry.

Claim: Tanning devices are sometimes used for medical purposes.

Medical conditions should only be treated under the supervision of medical professionals using medically recognized treatments. This allows for discussions about the potential benefits, harms and risks associated with a procedure as well as close monitoring for abnormal side effects.

Phototherapy, an FDA approved medical device, emits concentrated UV rays in different ratios than tanning devices. The ratio of UVA and UVB rays are closely monitored and change depending on the skin condition being treated. The rays are often applied only to the specific area needing treatment rather than the entire body and are often used either after a medication has been shown to be ineffective at treating the condition, or in conjunction with a medication.[14] In some cases, phototherapy devices can be used at home under a physician's supervision.[15] The National Institute of Arthritis and Musculoskeletal, and Skin Diseases recommends that "light therapy be administered by a doctor. Spending a lot of time in the sun or a tanning device can cause skin damage, increase the risk of skin cancer, and worsen symptoms."

Claim: Older people have higher rates melanoma than younger ones.

Since UV radiation is cumulative, it can take a significant amount of time before UV exposure develops into melanoma, which is why higher rates of melanoma are often seen in late adulthood.[16] The current increase in melanoma in older populations is the result of exposure to UV radiation starting in childhood and young adult years. That means preventing exposure to UV radiation as early as possible in a person's life is important.

Recently a concerning trend has appeared showing increasing rates of melanoma in young women. One study showed that the incidence among young white women aged 15 to 39 years increased from 5.5 cases per 100,000 people in 1973 to 13.9 cases per 100,000 people in 2004, a larger increase then in men of the same age. As mentioned previously, UV exposure is cumulative. With rates increasing in young women, it suggests that this group is getting more exposure to UV radiation at a younger age.

Claim: UV rays are essential for producing Vitamin D, an essential nutrient for good health.

Vitamin D is an essential vitamin that is needed for bone health. It can be obtained through many different sources including foods, supplements, and even exposure to UV light.[17]

However, the amount of UV light needed to produce enough vitamin D is minimal but puts a person at risk for skin cancer making supplements and food sources the preferable option.[18]

Claim: Parents should be able to decide whether children use tanning devices.

Products or devices deemed to be harmful are often regulated to protect consumers. The World Health Organization now categorizes tanning devices as a class 1 carcinogen, the same category as asbestos and tobacco, and recommends that minors not be allowed to use them. Therefore, because of the dangers associated with indoor tanning devices these products should be regulated.

Claim: Youth will find other ways to get a tan if they are not allowed access to tanning salons. They may purchase a tanning device for their personal use at home.

Tanning devices are not cheap, costing well over $1,000 for a new device[19] and also require room for storage – two key issues for many parents. To assume that every teenager who is unable to use a tanning device in a salon due to an age ban will purchase one is an unfounded claim.

Claim: Tanning device operators go through training. Therefore they can properly educate users about the potential risks of tanning.

Many tanning salon employees and operators are teenagers, and while they may be taught how to use and operate tanning devices, they are not provided with sufficient information to educate users about the long and short term consequences of using an indoor tanning device. The tanning industry in 2012 settled with the Federal Trade Commission over false claims made to the public regarding the "benefits" of tanning.[20] Additionally, many studies have shown that tanning salon operators actually encourage young women to tan citing health benefits and indicating that there are no potential health concerns.[21]

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[1] American Cancer Society. "Cancer Facts and Figures 2013". Atlanta: American Cancer Society; 2013.
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[3] Mariotto AB, Yabroff KR, Shao Y, Feuer EJ, and Brown ML. "Projections of the Cost of Cancer Care in the United States: 2010-2020."Journal of the National Cancer Institute, 2011;103(2).
[4] Bleyer A, O'Leary M, Barr R, Ries LAG. "Cancer Epidemiology in Older Adolescents and Young Adults 15 to 29 Years of Age, Including SEER Incidence and Survival: 1975-2000". National Cancer Institute, NIH Pub. No. 06-5767. Bethesda, MD 2006.
[5] American Cancer Society. "Cancer Facts and Figures 2013". Atlanta: American Cancer Society; 2013.
[6] American Cancer Society. "Cancer Facts and Figures 2013". Atlanta: American Cancer Society; 2013.
[7] Lim HW, James WD, Rigel DS, Maloney ME, Spencer JM, Bhushan R. "Adverse effects of ultraviolet radiation from the use of indoor tanning equipment: time to ban the tan". J Am Acad Dermatol 2011;64:893–902.
[8] American Cancer Society. "Melanoma of the Skin". Atlanta: American Cancer Society;2012
[9] American Cancer Society. "Melanoma of the Skin". Atlanta: American Cancer Society;2012
[10] Boniol B, Autier P, Boyle P, Gandini S. "Cutaneous melanoma attributable to sunbed use:

systematic review and meta-analysis". British Medical Journal, 2012; 345:e4757. Correction published December 2012; 345:e8503

[11] Centers for Disease Control and Prevention. (2012) "Youth Risk Behavior Surveillance – United States, 2011". MMWR 2013;61:4

[12] U.S. House of Representatives Committee on Energy and Commerce Minority Staff. "False and Misleading Information Provided to Teens by the Indoor Tanning Industry – Investigative Report" February 2012.

[13] United States of America Federal Trade Commission. "In the Matter of Indoor Tanning Association, a corporation - Docket Number C-4290 Decision and Order." May 13, 2010. Available at http://ftc.gov/os/caselist/0823159/100519tanningdo.pdf

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[15] National Institute of Arthritis and Musculoskeletal, and Skin Diseases. "Psoriasis" Obtained August 21, 2013 from http://www.niams.nih.gov/Health_Info/Psoriasis/default.asp

[16] Lin J, Eder M., Weinmann S., Zuber S., Beil T., Plaut D.,Lutz K."Behavioral Counseling to Prevent Skin Cancer". Agency for Healthcare Regulation and Quality, 2011. Publication No. 11-05152-EF-1

[17] American Cancer Society. "Cancer Prevention and Early Detection Facts and Figures 2013". Atlanta: American Cancer Society; 2013.

[18] American Cancer Society. "Cancer Prevention and Early Detection Facts and Figures 2013". Atlanta: American Cancer Society; 2013.

[19] American Cancer Society Cancer Action Network internet research.

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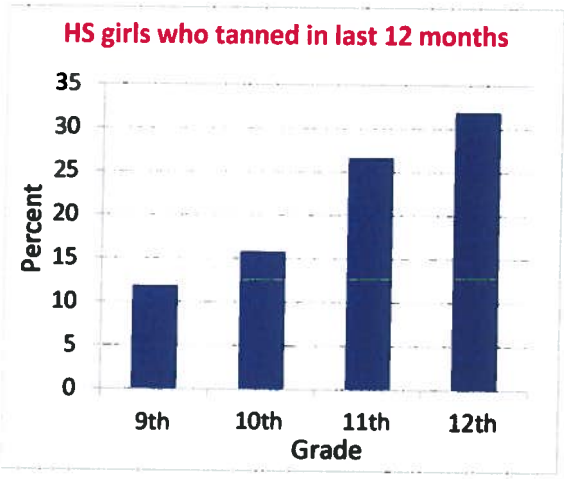
[21] U.S. House of Representatives Committee on Energy and Commerce Minority Staff. "False and Misleading Information Provided to Teens by the Indoor Tanning Industry – Investigative Report" February 2012.

Youth and Indoor Tanning

Younger people are at a higher risk than the rest of the population of suffering from the harmful effects of indoor tanning devices later in life.[1] In fact, melanoma, the most deadly form of cancer, is the second most common cancer among younger men and women aged 15-29 years.[2]

The Facts

- Ultraviolet (UV) radiation, from the sun and indoor tanning devices cause skin cancer as well as; eye damage, suppression of the immune system and premature aging of the skin.[3]
- Because a young person's skin is still developing it makes them even more susceptible to the harmful effects of UV rays.[4]
- Severe sunburn during childhood significantly increases the risk of melanoma later in life.[5]
- In fact, using a tanning device before the age of 35 increases the risk of melanoma by 59 percent. [6]
- Using a tanning device also increases the chance of squamous cell carcinoma by 67 percent and basal cell carcinoma by 29 percent. The risk for these cancers is even higher when a tanning device is used before age 25. [7]
- The rate of indoor tanning device use increases drastically as high school girls grow older, from 11.7 percent among 9th graders to 31.8 percent among 12th graders.[8]
- Among teens who tanned, 58 percent reported getting a burn from a tanning device within the past year.[9]



- An estimated 1,800 emergency room cases each year can be attributed to indoor tanning devices.[10]
- The dangers of tanning devices are so serious that the World Health Organization has put these in the same category as tobacco and asbestos, marking them as "carcinogenic to humans".[11]

Factors that Increase Youth Tanning

- Youth are faced with a great deal of incorrect and false information from the indoor tanning industry about the risks of tanning.
  - A 2012 congressional committee report showed that tanning salons often deny the risks of tanning and indicate it is beneficial to a young person's health.[12]
  - In 2010 the Federal Trade Commission settled with the Indoor Tanning Association regarding false health and safety claims.[13]
- Indoor tanning salons do not follow recommended guidelines. For instance, 71 percent of tanning salons would allow a teen to tan more often than the 3 times per week recommended by the federal government.[14]
- A 2011 study published in the American Journal of Public Health found many factors that increase tanning among younger people. Youth were more likely to use a tanning device if they:[15]
  - Believed people with a tan look more attractive (80 percent more likely)
  - Believed that their parents allowed them to use indoor tanning (80 percent more likely)
  - Had a parent who used indoor tanning (70 percent more likely)
  - Noticed advertisements for indoor tanning (70 percent more likely)
  - Had a parent who believed people with a tan are more attractive (50 percent more likely)
  - Lived within two miles of at least one indoor tanning facility (40 percent more likely)

Addressing the Problem – The Importance of Age Restrictions

- Several organizations are in favor of restricting access to tanning devices among young persons under the age of 18. These include the American Cancer Society Cancer Action Network, the American Academy of Dermatology, the American Medical Association, and the World Health Organization among others.
- Restricted access to tanning devices is consistent with other policies that protect youth from harmful devices substances like tobacco and alcohol.
- States across the country are already beginning to protect youth by passing and implementing comprehensive laws which restrict minors' use of tanning beds.
- Internationally, Germany, England, the UK, Greece, and several areas in Canada and Australia have restricted access to tanning beds for everyone under age 18. Brazil and New South Wales, Australia have banned tanning altogether.

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[1] American Cancer Society. "Cancer Prevention and Early Detection Facts and Figures 2013". Atlanta: American Cancer Society; 2013.
[2] Bleyer A, O'Leary M, Barr R, Ries LAG. "Cancer Epidemiology in Older Adolescents and Young Adults 15 to 29 Years of Age, Including SEER Incidence and Survival: 1975-2000". National Cancer Institute, NIH Pub. No. 06-5767. Bethesda, MD 2006.
[3] Vianio H, Wilbourn J. "Identification of carcinogens within the IARC monograph program. Scand J Work Environ Health. 1992;18 (Suppl 1):64-73.
[4] American Cancer Society. "Melanoma of the Skin". Atlanta: American Cancer Society.
[5] American Cancer Society. "Cancer Facts and Figures 2013". Atlanta: American Cancer Society; 2013.
[6] Boniol B, Autier P, Boyle P, Gandini S. "Cutaneous melanoma attributable to sunbed use: systematic review and meta-analysis". British Medical Journal, 2012; 345:e4757. Correction published December 2012; 345:e8503
[7] Wehner et al. "Indoor tanning and non-melanoma skin cancer :systematic review and meta-analysis." British Medical Journal. October 2012
[8] Centers for Disease Control and Prevention. "Youth Risk Behavior Surveillance-United States, 2011". MMWR 2012;61(4):41.
[9] Cokkinides V, Weinstock M, Lazovich D, Ward E, Thun M. "Indoor tanning use among adolescents in the US, 1998-2004." Cancer 2009; 115: 190-198.
[10] Food and Drug Administration. "Radiation Emitting Products" - accessed September 13, 2013 at http://www.fda.gov/Radiation-EmittingProducts/RadiationEmittingProductsandProcedures/HomeBusinessandEntertainment/ucm116447.htm
[11] Ghissassi, et al.. "A Review of Human Carcinogens – Part D: Radiation." The Lancet – Oncology; 2009: 10.
[12] U.S. House of Representatives Committee on Energy and Commerce Minority Staff. "False and Misleading Information Provided to Teens by the Indoor Tanning Industry – Investigative Report" February 2012.
[13] United States of America Federal Trade Commission. "In the Matter of Indoor Tanning Association, a corporation - Docket Number C-4290 Decision and Order." May 13, 2010. Available at http://ftc.gov/os/caselist/0823159/100519tanningdo.pdf
[14] Pichon LC, Mayer JA, Hoerster KD, et al. "Youth access to artificial UV radiation exposure: practices of 3647 US indoor tanning facilities." Archives of Dermatology. Sept 2009;145:997-1002.
[15] Mayer, et al. (2011). "Adolescent's Use of Indoor-Tanning: A Large-Scale Evaluation of Psychosocial, Environmental, and Policy-Level Correlates." American Journal of Public Health, May 2011; 101:5.

Indoor Tanning

The use of indoor tanning devices have been directly linked to an increase in skin cancer.[1] [2] As a result, tanning devices have been placed in the same category as asbestos, tobacco, and other harmful substances by the World Health Organization.[3]

The Facts about Indoor Tanning Devices

- Indoor tanning devices include beds, booths, and sunlamps that emit ultraviolet (UV) radiation.
- UV radiation causes skin cancer as well as immune suppression, eye damage, and premature aging of the skin.[4]
- Tanning beds have been classified as "Carcinogenic to humans" by the World Health Organization – International Agency for Research on Cancer. [5]
- Every year tanning devices cause 1,800 injuries that require a visit to the emergency room.[6]
- Young non-Hispanic white women between the ages of 18 and 21 are the most common adult tanners, with 32 percent reporting using a tanning bed an average of 28 times in the past year.[7]

Indoor Tanning and Skin Cancer

- An estimated 3.5 million skin cancers were diagnosed in 2.2 million people in 2006.[8]
- Melanoma, the most deadly form of skin cancer, is expected to be diagnosed in 76,690 people in 2013. It will kill an estimated 9,480.
- Melanoma is the second most common cancer among men and women aged 15-29 years.[9] Rates have been increasing for over 30 years.[10]
- Tanning before age 35 increases the risk of melanoma by 59 percent.[11]
- Using a tanning bed increases basal and squamous cell carcinomas by 29 percent and 67 percent respectively. Rates increase even more when they are used before age 25.[12]
- UV radiation from indoor tanning and other sources is cumulative over time. The earlier a person starts tanning, the greater the risk of getting melanoma and other skin cancers later in life.[13]

Common Misconceptions

- Tanning is not healthy. A tan actually indicates damage to the skin.[14]
- There is no medical need to get a tan.
    - Vitamin D can be obtained through safe sources such as supplements, milk, cereal, and oily fish.[15]
    - Skin disorders should be treated under the supervision of a physician using only FDA approved medical devices.
- The indoor tanning industry has been identified on many occasions as giving false information to consumers.[16] [17] For example, a congressional committee report showed that tanning salons often deny the risks of tanning and indicate it is beneficial to a young person's health.

September 2013

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[5] Ghissassi, et al.. "A Review of Human Carcinogens – Part D: Radiation." The Lancet – Oncology; 2009: 10.

[6] Food and Drug Administration. "Radiation Emitting Products" - accessed September 13, 2013 at http://www.fda.gov/Radiation-EmittingProducts/RadiationEmittingProductsandProcedures/HomeBusinessandEntertainment/ucm116447.htm

[7] National Health Interview Survey. 2010.

[8] Rogers HW, Weinstock MA, Harris AR, et al. "Incidence estimate of nonmelanoma skin cancer in the United States, 2006. Archives of Dermatology. 2010;146(3):238-287

[9] Bleyer A, O'Leary M, Barr R, Ries LAG. "Cancer Epidemiology in Older Adolescents and Young Adults 15 to 29 Years of Age, Including SEER Incidence and Survival: 1975-2000". National Cancer Institute, NIH Pub. No. 06-5767. Bethesda, MD 2006.

[10] American Cancer Society. "Cancer Facts and Figures 2013". Atlanta: American Cancer Society; 2013.

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[13] American Cancer Society. "Melanoma of the Skin". Atlanta: American Cancer Society.

[14] Food and Drug Administration. "Radiation Emitting Products" - accessed September 13, 2013 at http://www.fda.gov/Radiation-EmittingProducts/RadiationEmittingProductsandProcedures/Tanning/ucm116432.htm

[15] Brannon PM, Yetley EA, Bailey RL, Picciano MF. "Overview of the conference "Vitamin D and Health in the 21st Centure:an Update". American Journal of Clinical Nutrition. 2008;88(suppl.):483S-490S.

[16] United States of America Federal Trade Commission. "In the Matter of Indoor Tanning Association, a corporation - Docket Number C-4290 Decision and Order." May 13, 2010. Available at http://ftc.gov/os/caselist/0823159/100519tanningdo.pdf

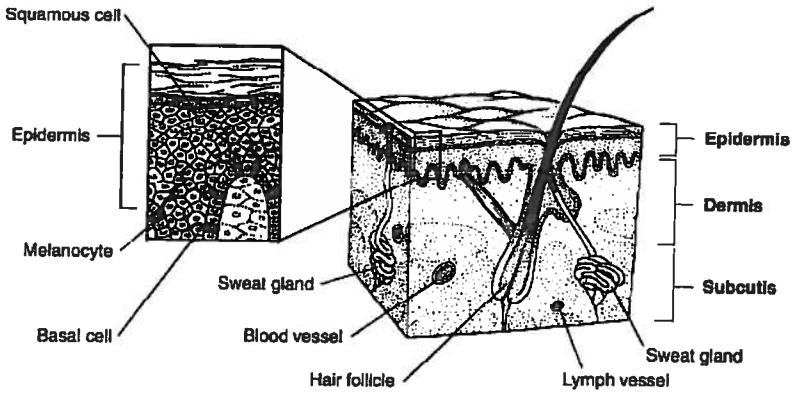
[17] U.S. House of Representatives Committee on Energy and Commerce Minority Staff. "False and Misleading Information Provided to Teens by the Indoor Tanning Industry – Investigative Report" February 2012.

Skin Cancer

Skin cancer is the number one cause of cancer in the United States. It is estimated that 3.5 million skin cancers were diagnosed in more than 2.2 million people in 2006 alone.[1]

Three Types of Skin Cancer

- There are three main types of skin cancer:[2] [3]
  - Melanoma – Begins in the melanocytes and is the most deadly form of skin cancer.
  - Squamous cell cancers – Start in the squamous cells of the skin and typically appear on sun exposed areas.
  - Basal cell cancers – Begins in the basal cell layer of the skin. These are slow growing and rarely spread.



- While basal and squamous cell skin cancers make up most of the skin cancer diagnoses, melanoma causes the most deaths.[4]

Melanoma

- Melanoma is expected to be diagnosed in 76,690 people in 2013 and will kill an estimated 9,480.[5]
- Incidence rates have been increasing for the last 30 years.[6] Between 2006 and 2009 rates increased by about 3% per year in whites.[7]
- It is estimated that 65 to 90 percent of melanomas are caused by ultraviolet (UV) radiation.[8]
- The cost associated with melanoma treatments was about $2.36 billion in 2010. Costs are only expected to grow as more people get diagnosed.[9]

Prevention of Skin Cancer

- UV radiation, from the sun and indoor tanning devices, is the primary cause of skin cancer. The two types of UV radiation that cause the most damage to skin are [10]
  - UVA – The most common kind of UV light which penetrates below the top layer of skin.
  - UVB – Does not penetrate as deeply as UVA rays, but still damages the skin.
- Avoiding exposure to UV light is the best way to prevent skin cancer.[11] This can be done by:[12] [13]
  - Limiting time outside when UV rays are most intense - from 10 a.m. to 4 p.m.
  - Seeking shade when outdoors.
  - Wearing sun protective clothing (long sleeves and pants, hat, and sunglasses).
  - Using broad spectrum sunscreen with a SPF of 30 or greater.
  - Avoiding indoor tanning devices.

[1] Rogers HW, Weinstock MA, Harris AR, et al. "Incidence estimate of nonmelanoma skin cancer in the United States, 2006. Archives of Dermatology. 2010;146(3):238-287

[2] American Cancer Society. "Skin Cancer: Basal and Squamous Cell". Atlanta: American Cancer Society

[3] National Cancer Institute. "What you need to know about melanoma and other skin cancers". Accessed September 12, 2013 at http://www.cancer.gov/cancertopics/wyntk/skin/page4

[4] American Cancer Society. "Cancer Prevention and Early Detection Facts and Figures 2013". Atlanta: American Cancer Society; 2013.

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Debunking False Claims

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[5] American Cancer Society. "Cancer Prevention and Early Detection Facts and Figures 2013". Atlanta: American Cancer Society; 2013.

[6] American Cancer Society Cancer Action Network internet research.

[7] United States of America Federal Trade Commission. "In the Matter of Indoor Tanning Association, a corporation - Docket Number C-4290 Decision and Order." May 13, 2010. Available at http://ftc.gov/os/caselist/0823159/100519tanningdo.pdf

[8] U.S. House of Representatives Committee on Energy and Commerce Minority Staff. "False and Misleading Information Provided to Teens by the Indoor Tanning Industry – Investigative Report" February 2012.